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☐ Yes ☒ No

3. Nature of conveyance:

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Name: **Symrise GmbH & Co. KG**Address: **Mühlenfeldstrasse 1**City: **Holzminden**

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Country: **GERMANY**ZIP: **37603**

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4. Application number(s) or patent numbers(s):

If this document is being filed together with a new application, the execution date of the application is: _____

Patent Application No.

Filing date

10/028,609

12/19/01

09/939,299

8/24/01

09/915,716

7/26/01

10/100,337

3/18/02

Additional numbers

B. Patent No.(s)

☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **Evelyn A. Defillo**Registration No. **45,630**Address: **PENDORF & CUTLIFF****5111 Memorial Highway**City: **Tampa**State/Prov.: **FL**Country: **U.S.**ZIP: **33634-7356**

6. Total number of applications and patents involved:

4

7. Total fee (37 CFR 3.41):.....\$ **160.00**☒ Enclosed - Any excess or insufficiency should be credited or debited to deposit account☐ Authorized to be charged to deposit account

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*To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.***Evelyn A. Defillo**

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January 16, 2003

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